Dual Employment Agreement(Department of). I understand that services performed for another State

As an employee of the parent agency, (Department of			
☐ Beacon to Beacon ☐ Other			
☐ Beacon to Non-Beacon ☐ Non-Beacon			
Parent Agency Information Employee Name: Personnel #:			
Position #: Job Title: FLSA:			
Hrs Per Wk: EE Group: EE Subgroup: Salary:			
Borrowing Agency Information Position #: Job Title: FLSA: Hrs Per Wk: EE Group: EE Subgroup: Salary: Annual Hourly Blanket			
Dual Employment Work Schedule:			
Assignment Begin Date: Assignment End Date: Description of Work:			
Will work performed create a conflict of interest? ☐ Yes ☐ No Explain:			
Percent indicates agreed amount to be funded by each Agency.			
Parent Agency Borrowing Agency Benefits%% Retirement%% Overtime Eligible%% Leave Accrual EligibleYes _NoYes _No Leave Accrual EligibleYes _NoYesNo			

Workers' Compensation – When an employee who holds two separate jobs is injured in one of them, the employee's Workers' Compensation entitlements are based only upon the average weekly wages earned in the employment producing the injury. (GS 97-2.) Over 40 hours paid - weighted average.

Completed by Borro	wing Agency: Analysis of Payment to Paren	t Agency (Fill in as Applicable)
Salary for Services \$		
Matching Retirement \$		
Matching Social Security \$ Travel Subsistence \$ Gross due to Employee \$ Total Payment due Parent Agency \$		
Note: Borrowing Agand subsistence.	gency is assuming liability for accuracy and s	statutory compliance for travel
Cost Distribution (N	leed to discuss with FI)	
Agency Code		
Subhead Code		
Retirement Code		
	aring the Dual Employment Agreement must ate approved forms for processing.	be sent to BEST Shared
within the regulation of the my Department of	d explained to me, the policy governing Dual Employment. Dual Employment Policy and does not constitute either a d Employment will not affect my regular job perforn al Employment Policy will constitute a violation and subject	irect or indirect conflict of interest with nance. I understand that failure on my
Employee Signature:		
Recommended By:	Employee Name	Date
necommenced by.	Parent Supervisor/Division Director	Date
Approved By:		
D., J., .4.	Parent Agency Human Resources	Date
Budget:	Danant Puda at Officer	Data
Pagamman dad Pw	Parent Budget Officer	Date
Recommended By:	Borrowing Agency Supv/Division Director	Date
Annuau ad Du		
Approved By:	Rorrowing Agency Human Pasaurees	 Date
Rudgat	Borrowing Agency Human Resources	Duie
Budget:	Borrowing Budget Officer	Date
D 1 D		
Processed By:	RFST Shared Services	Date